

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 146

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bachmann for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Patricia Kasper Mailing Address 13815 47th St NW City Annandale State MN Zip Code 55302 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Homemaker Occupation Homemaker Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 8 / 2 0 0 7 <b>Transaction ID:</b> 70911.C16299 Amount of Each Receipt this Period 100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) John Kinkead Mailing Address 693 Montcalm Pl City Saint Paul State MN Zip Code 55116-1745 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer National Mowers Occupation Manufacturer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 7 <b>Transaction ID:</b> 71003.C16958 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Robert Klas Mailing Address 892 Marie Ave W City Saint Paul State MN Zip Code 55118-4224 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Tapemark, Inc. Occupation Chairman Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 7 / 2 0 0 7 <b>Transaction ID:</b> 70816.C16110 Amount of Each Receipt this Period 250.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

1350.00

TOTAL This Period (last page this line number only) .....